



Eligibility Process and Best Practices

Historically, verifying eligibility has been a very manual process. Users have had to log into DHS and check one by one to verify all relevant details for each client. Pavillio is able to bring back the necessary data and you're able to see these details.

Service Status

Eligibility is checked across the system on the first day of each month and every Sunday. In Current Clients, you'll see the **Service Status** for all clients. There are three statuses:

- **Ready**- The client has MA eligibility, has an Active Service Agreement and a current care delivery
- **Partially Ready** – the client has an Active Service Agreement but is missing a care delivery
- **Not Ready** – the client does not have MA eligibility or Active Service Agreement

The **Service Status** filter can be used to search for clients who are in **Partially Ready** or **Not Ready** status to help you get the profiles in a **Ready** status for services and billing.

Dashboard > Widget: Total clients not eligible

In addition to service status, for each client, there is a dashboard widget that will display clients who are NOT eligible.

*Note: Dashboards widgets and information displayed are based on the user's role. For example, Agency admin and Billers will see all clients who are not eligible. Agency Case Managers will only see the clients that are assigned to them.

There are two statuses that display here:

1. **Unknown**: There is an issue with the data on the client profile where eligibility can't be verified. An example would be incorrect date of birth or incorrect PMI number. There may be times that the file from MN DHS returns the correct DOB and thus the client is eligible in Pavillio. However, the DOB in Pavillio is incorrect which may result in Denied claims. Thus, it is vital to ensure that the client's DOB in Pavillio is accurate.
2. **Not Eligible**: The response has come back from DHS that the client is not eligible. It is vital that you ensure all information in Pavillio is accurate to ensure that it is not a data entry causing the Not Eligible status.

Reporting

Minnesota

Additionally, there is a report in analytics that needs to be reviewed after the first of each month. Payors can change from month to month without notice and this report will compare the payor on the service agreement to the payor that's coming back in the eligibility check process.

The **Client Eligibility Report- Differences PS** will show what the waiver is, and who the payor is (both on the service agreement and coming back in eligibility.)

By referencing this report, you can determine if you've got the correct payor assigned in the service agreement and if something has changed, you can contact the county case manager for updated information.

MN Medical Assistance VS Minnesota Care

This handout is for Pavillio Best Practices: How to Save time, Be More Efficient, See Results webinar. See the Pavillio help area for most current user experiences, FAQs and recordings. 09252023.

With the COVID public health emergency being lifted and recertification of Medical Assistance happening, there are folks that have had asset limit changes and qualify for a different program. When this occurs, program eligibility changes (MA is still eligible but the service offering is different.)

We have created a report to help identify these program changes. This should also be referenced on the first of each month to confirm that the program eligibility has not shifted. The report can be found in Pavillio. **Reports > Client > Eligibility Free Form.**

This report can be exported and filtered to search for specific plans, like Minnesota Care, so you can address this before receiving claim denials.

